PART B - FEE(S) TRANSMITTAL

Complete and stad this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE

Commissioner for Patents

P.O. Box 1450

Alexandria, Virginia 22313-1450

or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

indicated unless corrected t maintenance fee notification	pelow or directed otherwise is.	in Block I, by (a)	specifying a			; and/or (b) indicating a sepa		
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
23334 7590 03/28/2006								
FLEIT, KAIN, GIBBONS, GUTMAN, BONGINI & BIANCO P.L. ONE BOCA COMMERCE CENTER					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
551 NORTHWEST 77TH STREET, SUITE 111					(Depositor's name)			
BOCA RATON, FL 33487							(Signature)	
							(Date)	
APPLICATION NO.	FILING DATE	F	FIRST NAMED INVEN		TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/077,371 02/15/2002			Wayne A. Sawdon			POU920020009US1	3680	
APPLN, TYPE	RITABLE FILE SYSTEM S SMALL ENTITY	ISSUE FE	₁		JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO NO	\$1400			\$300	\$1700	06/28/2006	
<u> </u>	EXAMINER ART U		т [CLASS-SUBCLASS]		
ORTIZ, BELIX M		2164			707-204000	J		
Change of correspondence address or indication of "Fee			2 For printing on the patent front page, list					
CFR 1.363). Change of correspond Address form PTO/SB/1. XXIV-Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Lawrence D. Cutter Kevin M. Jordan Fleit, Kain, Gibbons, Gutman, Bongini &							
<u> </u>	RESIDENCE DATA TO BI	E PRINTED ON T	HE PATENT	(print c	or type)	Bianco		
						nee is identified below, the d	document has been filed for	
					E: (CITY and STATE OR COUNTRY) , New York			
Please check the appropriate	assignee category or categor	ries (will not be pri	nted on the pa	atént) :	Individual XXC	orporation or other private gr	oup entity Government	
4a. The following fee(s) are enclosed: 4b Tissue Fee XPublication Fee (No small entity discount permitted) Advance Order - # of Copies			D. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 09-0463 (enclose an extra copy of this form).					
_ ° '	(from status indicated above) MALL ENTITY status. See 3	•	☐ h Annlier	ant is no	langer claiming SMA	LL ENTITY status. See 37 C	FR 1 27(a)(2)	
The Director of the USPTO NOTE: The Issue Fee and P	is requested to apply the Issu	e Fee and Publicat	ion Fee (if an	v) or to	re-apply any previous	ly paid issue fee to the application of the application of the attorney or agent, or found in the application of the attorney or agent, or found in the attorney or agent, or found in the attorney or agent, or found in the attorney or agent.	ation identified above.	
Authorized Signature	Alle ha					1506 7 1200,00 10		
Typed or printed name	Jeffrey N. G	iunta			Registration 1	No. 42,583		
submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virg Alexandria, Virginia 22313-	polication form to the USPTO for reducing this burden, shinia 22313-1450. DO NOT S	O. Time will vary ould be sent to the SEND FEES OR C	depending up Chief Inform OMPLETED	on the ination O FORM	individual case. Any conficer, U.S. Patent and S TO THIS ADDRES	the public which is to file (an minutes to complete, including omments on the amount of ting trademark Office, U.S. Dep S. SEND TO: Commissioner displays a valid OMB contro	me you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,	